

VT Health Care Innovation Project Steering Committee Meeting Minutes

Pending Committee Approval

Date of meeting: Wednesday, February 25, 2015; 1:00-3:00 pm, EXE - 4th Floor Conf Room, Pavilion Building, 109 State Street, Montpelier

Agenda Item	Discussion	Next Steps
1. Welcome and	Al Gobeille called the meeting to order at 1:03 pm.	
Introductions		
2. Core Team	Al Gobeille and Lawrence Miller bid farewell to former DVHA Commissioner Mark Larson and welcomed new	
Update	DVHA Commissioner and Steering Committee Co-Chair Steven Costantino. Attendees introduced themselves.	
Public Comment	No public comments were offered.	
3. Minutes	John Evans moved to approve the minutes from the November Steering meeting. Trinka Kerr seconded. A roll	
Approval	call vote was taken and the motion passed with three abstentions.	
4. 2014 Year in	Georgia Maheras presented and update to the VHCIP (Attachment 2).	
Review: Progress		
and Major	Slide 10 correction: 197 provider sites connected to the HIE.	
Activities	State HIT system that is utilized by providers: VITL access launched last year.	
	EHR adoption rate is around 87%	
	Update to slide 13: over 92 attendees at the first Learning Collaborative.	
Public comment	No public comments were offered.	
5. Discussion:	Al Gobeille discussed the role of the Steering Committee (Attachment 3).	
Steering		
Committee Roles	The role of the Steering Committee should not be repetitive of work group efforts but guide the Core Team in	
and Decision-	decision making. The group discussed criteria presented in the memo.	
Making Process		

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	The Committee should consider the following:	
	 That proposals being received from the work group are going to achieve the goals of the SIM grant. 	
	 If the proposal affects any other work group and considered the impact on the goals of other work 	
	groups – the Committee should make sure the work groups are all moving in alignment.	
	 Steering Committee can make requests back to work group to revise proposals before they can make recommendations to the Core Team. 	
	 Steering Committee should reflect upon the work group's voting status and whether there was a strong consensus. 	
	 Understanding that the work group is where the work should happen. Steering is not the environment where issues should be worked through and proposals should not come to Steering without that understanding. Concerns about feasibility of this with more time sensitive issues. 	
	 Reform initiatives are a result of voluntary stakeholders which often results in considerable effort within the work groups. 	
	 Work group staff have access to all work group work plans which will support timeliness and work group alignment. 	
	 Work groups are looking to the Steering Committee for oversight and guidance in this arena. 	
	 The proposal puts Steering in oversight of the process, verses substance, which is better suited for the work groups and Core Team. 	
Public comment	No further comments were offered.	
6. Work Group	1. Erin Flynn presented the Proposed ACO Care Management Standards as approved by the Care Models	
Policy	and Care Management work group (Attachment 4).	
Recommendation	There were two votes against this proposal in the CMCM work group.	
	 ACOs are looking for the standards to be aspirational guidelines and want to understand how 	
	the standards are going to be measured and how are they going to be held accountable.	
	Measurement and accountability will be agreed upon officially under the ACO contracts.	
	 The language in the current proposal is written in the form of a recommendation and is not a mandate. 	
	 This work is not applicable to those providers who are not participating in an ACO. 	
	 The standards are a collaborative effort between ACO representatives as well as payers. 	
	 Referring to the process discussed in agenda item 4, the group agreed that the proposal met the criteria presented in Attachment 2, section 1 b. 	
	Dale Hackett moved to recommend the standards presented to the Core Team. Tracy Dolan seconded. A roll call vote was taken. The motion passed with two votes against it.	

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	2. Georgia Maheras presented a letter to the Governor regarding DLTSS Funding (Attachment 5).	
	Trinka Kerr moved to recommend the DLTSS letter to the Core Team. Nancy Eldridge seconded. The motion	
	passed with six abstentions.	
Public comment	No further comments were offered.	
7. Work Group	1. Georgia Maheras presented the Frail Elders Proposal (Attachment 6a), which addressed concerns raised	
Funding Proposals	at the previous meeting. Changes include:	
	 Extending project timeline to six months. 	
	 Scope expanded which increased the project budget. The budget increase is covered by unallocated money under the SIM grant. 	
	 Referring to the process discussed in agenda item 4, the group agreed that the proposal met the criteria presented in Attachment 2, section 1 b. 	
	It was noted that DAIL policy staff support this proposal.	
	Nancy moved to recommend the proposal to the Core Team and Allan Ramsay seconded. A roll call vote was taken and the motion passed unanimously.	
	2. Jim Hester Contract	
	 Tracy Dolan presented Attachment 6b which proposed to amend the current SIM contract with Jim Hester. 	
	 Referring to the process discussed in agenda item 4, the group agreed that the proposal met the criteria presented in Attachment 2, section 1 b. 	
	Allan Ramsay moved to recommend the proposal to the Core Team. Dale Hackett seconded. A roll call vote was taken and the motion passed unanimously.	
Public comment	No further comments were offered.	
8. Next Steps, Wrap	Next Meeting: Wednesday, April 1, 2015 1:00 pm – 3:00 pm, Montpelier – location TBA	
Up and Future		
Meeting Schedule		